

Validity screening solutions

Returning User Log In: password

(Forgot password? Click here.) (New User? Click here.)

4-H Youth Development CBC Online Application 4-H Youth Development CBC

[Home](#)

Applications are being accepted for the following positions: [CHANGE LOCATION](#)

Atchison County [SUBMIT](#)

Barber County [SUBMIT](#)

Barton County [SUBMIT](#)

Brown County [SUBMIT](#)

Haskell County [SUBMIT](#)

Hodgeman County [SUBMIT](#)

Johnson County [SUBMIT](#)

Kearny County [SUBMIT](#)

Clark County [SUBMIT](#)

Coffey County [SUBMIT](#)

Comanche County [SUBMIT](#)

Cowley County [SUBMIT](#)

Dickinson County [SUBMIT](#)

Scroll down to Johnson County. Click "SUBMIT".

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Please log in...

To continue, you must first [click here](#) to create a system account.

If you already have an account on the system, please log in using the "Returning User Log In" above.

If you are having technical or completion issues please click [HERE](#).

Click "click here" to create a log in.

Complete all the fields and click "Save".

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Returning User Log In: password
(Forgot password? Click here.) (New User? Click here.)

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User Registration

(fields marked in *** red *** are required)

Account Information

Login User Name (check availability)

Email Address

Confirm Email Address

Profile Information

First Name

Middle Name

Last Name

Suffix

Address Line 1

Address Line 2

City

State

Zip Code

County

Phone Number

If you are having technical or completion issues please click [HERE](#).

You will receive an email from Validity at the email address you typed in during the previous step. Open the email and click the link to log in and create a password.

Account Activation for [redacted] Inbox X

Validity Screening Solutions notifications@validityscreening.com via ser 11:55 AM (1 minute ago) ☆ ↶ ↷

to me

Welcome [redacted]

***** PLEASE DO NOT REPLY TO THIS E-MAIL. THIS MAILBOX IS NOT MONITORED. *****

You have successfully signed up for an account with Validity Screening Solutions' eJobApp system. You must confirm your email address and select your personalized password to continue with the process. To complete your submission you must:

- Create your new password (click here to set password link)
- Once logged in, click Apply or Submit to begin the process
- Fill out all necessary fields as specified and complete by clicking blue "Submission" at the end

Below you will find a link that you can use to login to your account and set your password to something you like.

Username: [redacted]

[Click here to login and set your password](#)

Sincerely,
Validity Screening Solutions

CONFIDENTIALITY NOTICE: This e-mail message including attachments, if any, is intended only for the person or entity to which it is addressed and may contain confidential and/or privileged material. Any unauthorized review, use, disclosure or distribution is prohibited. If you are not the intended recipient, please contact the sender by e-mail and destroy all copies of the original message.

password

[Forgot password? Click here.](#) ([New User? Click here.](#))

Tip: After you set up your password you may have to log in again at the top of the screen.

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SECTIONS
:: Instructions
:: Review

Instructions

- This process will take approximately 5 to 10 minutes.
- Please answer all questions accurately and honestly.

Previous Next

Don't forget to SAVE!

If you are having technical or completion issues please click [HERE](#).

Click "Next" on the following two pages.
Be sure to read the information carefully on all pages.

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SECTIONS
:: Instructions
:: Review

Review

Please review this list to make sure you have completed your application. Incomplete sections are highlighted in red. If any required sections are not finished, you will not be able to complete your application.

Instructions
section is complete (no questions in this section)

***** Review Results *****
You have entered all required information for this application. Click the next button for disclosure and release information.

Previous Next

Don't forget to SAVE!

If you are having technical or completion issues please click [HERE](#).

Check the box.
Click "Save" and then "Next".

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Notice

I certify that I have read and understand any instructions presented in this screening profile and that the answers given by me to the foregoing questions, and any statements made by me in this screening profile, are complete and true to the best of my knowledge and belief.

I understand that any false information, omissions or misrepresentations of facts in this screening profile may result in rejection of my application or discharge at any time while I am a volunteer for Kansas 4-H. I authorize the organization and/or its agents, including consumer reporting bureaus, to access any of this information. Kansas 4-H, at its sole and complete discretion, may accept or decline my application without providing me the reasons for the decision.

All information obtained during the Volunteer Application Process will be kept confidential. I acknowledge that Kansas 4-H retains and does not grant access to the information acquired through the Volunteer Application Process to me or any other parties.

By checking this box, I affirm that the above statements are all true.

Save Reset

Previous Next

Don't forget to SAVE!

If you are having technical or completion issues please click [HERE](#).

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logged in as [redacted]

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Fair Credit Reporting Act

When you apply for a job or position, the employer may request to see your credit history or consumer reports. It may also specify an address for you to send your request. Under certain circumstances, a business can refuse to provide you with these documents. See www.consumerfinance.gov/learnmore.

4. You have the right to obtain information from a debt collector. If you ask, a debt collector must provide you with certain information about the debt you believe was incurred in your name by an identity thief – like the name of the creditor and the amount of the debt.

5. If you believe information in your file results from identity theft, you have the right to ask that a consumer reporting agency block that information from your file. An identity thief may run up bills in your name and not pay them. Information about the unpaid bills may appear on your consumer report. Should you decide to ask a consumer reporting agency to block the reporting of this information, you must identify the information to block, and provide the consumer reporting agency with proof of your identity and a copy of your [identity theft report](#). The consumer reporting agency can refuse or cancel your request for a block if, for example, you don't provide the necessary documentation, or where the block results from an error or a material misrepresentation of fact made by you. If the agency declines or rescinds the block, it must notify you. Once a debt resulting from identity theft has been blocked, a person or business with notice of the block may not sell, transfer, or place the debt for collection.

6. You also may prevent businesses from reporting information about you to consumer reporting agencies if you believe the information is the result of identity theft. To do so, you must send your request to the address specified by the business that reports the information to the consumer reporting agency. The business will expect you to identify what information you do not want reported and to provide an [identity theft report](#).

To learn more about identity theft and how to deal with its consequences, visit www.consumerfinance.gov/learnmore, or write to the Consumer Financial Protection Bureau. You may have additional rights under state law. For more information, contact your local consumer protection agency or your state Attorney General.

In addition to the new rights and procedures to help consumers deal with the effects of identity theft, the FCRA has many other important consumer protections. They are described in more detail at www.consumerfinance.gov/learnmore.

(Updated: November 2012)

By checking this box, I affirm that I have read and understood my rights as described in the above.

Don't forget to SAVE!

If you are having technical or completion issues please click [HERE](#).

Check the box.
Click "Save" and then "Next".

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logged in as [redacted]

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Disclosure Regarding Background Investigation

4-H Youth Development CBC ("the Organization") may obtain information about you from a third party consumer reporting agency for Organization purposes. Thus, you may be the subject of a "consumer report" and/or an "investigative consumer report" which may include information about your character, general reputation, personal characteristics, and/or mode of living, and which can involve personal interviews with sources such as your neighbors, friends, or associates. These reports may contain information regarding your credit history, criminal history, social security number validation, motor vehicle records ("driving records"), verification of your education or employment history, or other background checks. Credit history will only be requested where such information is substantially related to the duties and responsibilities of the position for which you are applying.

You have the right, upon written request made within a reasonable time, to request whether a consumer report has been run about you, and disclosure of the nature and scope of any investigative consumer report and to request a copy of your report. Please be advised that the nature and scope of the most common form of investigative consumer report is an employment history or verification. These searches will be conducted by Validity Screening Solutions, PO Box 25406, Overland Park, KS 66225-5406, 866.915.0792, www.validityscreening.com. The scope of this disclosure is all-encompassing, however, allowing the Organization to obtain from any outside organization all manner of consumer reports throughout the course of your volunteering to the extent permitted by law.

Please use your mouse to sign here (required for processing this application):

If the signature box does not load (if you see a red X in the window above), please upgrade your Internet browser software or install Flash.

To use the signature box place the cursor inside the signature box. Depress the left mouse button at the point where you would like to begin drawing your signature. Hold the left mouse button depressed while you draw. Release the mouse button between words. Please try to fill as much of the box as possible with your signature.

Click on the clear button to erase the box and start over again. It may take a number of attempts to produce an accurate signature. Use the undo button to undo the last pen stroke.

By checking this box, I affirm that I have read the above stated disclosure.

Don't forget to SAVE!

If you are having technical or completion issues please click [HERE](#).

Sign on the line using your mouse.
Check the box.
Click "Save" and then "Next".

Acknowledgment and Authorization

Kansas 4-H ("the Organization") may obtain information about you for volunteering purposes from a third party consumer reporting agency. You may be the subject of a "consumer report" and/or an "investigative consumer report." These reports may contain information regarding your credit history (as appropriate), criminal history, social security number validation, motor vehicle records, verification of your education or employment history, or other background checks. You have the right, upon written request made within a reasonable time, to request whether a consumer report has been requested and compiled about you, and disclosure of the nature and scope of any investigative consumer report and to request a copy of your report. This investigative consumer report obtained with regard to applicants for volunteering is conducted by Validity Screening Solutions, PO Box 860443, Shawnee, KS 66286-0443, 866.915.0792, www.validityscreening.com, or another outside organization. The scope of this notice and authorization is all-encompassing; however, allowing the Organization to obtain from any outside organization all manner of consumer reports and investigative consumer reports now and throughout the course of your volunteering to the extent permitted by law. As a result, you should carefully consider whether to exercise your right to request disclosure of the nature and scope of any investigative consumer report.

ACKNOWLEDGMENT AND AUTHORIZATION: I acknowledge receipt of the DISCLOSURE and A SUMMARY OF YOUR RIGHTS UNDER THE FAIR CREDIT REPORTING ACT and certify that I have read and understand both of those documents. I hereby authorize the obtaining of "consumer reports" and/or "investigative consumer reports" by the Organization at any time after receipt of this authorization and throughout my volunteering, if applicable. To this end, I hereby authorize, without reservation, any law enforcement agency, administrator, state or federal agency, institution, school or university (public or private), information service bureau, employer, or insurance company to furnish any and all background information requested by Validity Screening Solutions, PO Box 860443, Shawnee, KS 66286-0443, 866.915.0792, www.validityscreening.com, another outside organization acting on behalf of the Organization, and/or the Organization itself. I agree that a facsimile ("Fax"), electronic or photographic copy of this Authorization shall be as valid as the original.

Date of Birth - -

The EEOC states for the purpose of pre-employment inquiries, under the Age Discrimination in Employment Act of 1967, Section 1625.5, "A request on the part of an employer for information such as 'Date of Birth' or 'State Age' on an employment application form is not, in itself, a violation of the Act."

Social Security Number - -

Confirm Social Security Number - -

Driver's License Number

Driver's License State

Driver's License Type/Class

Check this box if you do not have a driver's license.

*This information will be used for background screening purposes only and will not be used as hiring criteria.

Please use your mouse to sign here (required for processing this application):



If the signature box does not load (if you see a red X in the window above), please upgrade your Internet browser software or install Flash.

To use the signature box place the cursor inside the signature box. Depress the left mouse button at the point where you would like to begin drawing your signature. Hold the left mouse button depressed while you draw. Release the mouse button between words. Please try to fill as much of the box as possible with your signature.

Click on the clear button to erase the box and start over again. It may take a number of attempts to produce an accurate signature. Use the undo button to undo the last pen stroke.

By checking this box, I hereby authorize Validity Screening Solutions and/or its authorized agents to generate a consumer and/or an investigative report on me as required by this organization. I understand that details from said report, or the report in its entirety, will be provided to the organization. (Privacy Policy)

Don't forget to SAVE!

If you are having technical or completion issues please click [HERE](#).

Complete all the fields.

Sign on the line using your mouse.

Check the box.

Click "Save" and then "Next".

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logged in as [redacted]

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Application Submission

Your Application has not yet been submitted. Please review the answers you provided for identification. If you need to make a change, click the 'Previous' button to go back to the section you want to change. If you are satisfied with your answers, you may submit your information by clicking the 'Submit application' button below.

Date of Birth: [redacted]
 Social Security Number: [redacted]
 Driver's License Number: [redacted]
 Driver's License State: [redacted]
 Driver's License Type/Class: [redacted]

Your Application has not yet been submitted. You must click the "Submit Application" button below to submit your Application.

[Submit Application](#) [Previous](#) [Next](#)

Review the information for accuracy.
 Click "Submit Application".
 Click Next.

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logged in as [redacted]

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Application Submission

Your information has been submitted!

[Ok](#)

If you are having technical or completion issues please click [HERE](#).

You should see the following screen.
 Click "Ok".

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logged in as [redacted]

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Note: Any partial applications that have not been submitted will be automatically deleted after 7 days.

The following record(s) were found in your account. If you have completed an application and/or filled out a release form, links to your documentation are listed along with the corresponding record:

<p>APPLICATIONS IN PROGRESS</p> <p>No in-progress applications found.</p>	<p>COMPLETED APPLICATIONS</p> <p>4-H Youth Development CBC - 4-H Youth Development CBC Johnson County Created: December 13, 2016 12:00 PM CST Completed: December 13, 2016 12:19 PM CST View Application View Notice (being created - check back in 2 minutes) View Summary of Rights (being created - check back in 2 minutes) View Disclosure View Authorization (being created - check back in 2 minutes)</p>
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Application Documents

Certain documents are required by law to be provided to anyone that may have their background investigated in relation to this type of application. Links to these documents, as well as any additional documentation related to your application, are provided below.


*All documents are in the Adobe PDF format and require the free Adobe Acrobat Reader to view, print and/or save to your computer. If you do not have Acrobat Reader, click on the link below to get it.

- [Summary of Rights and Identity Theft Information](#)
- [FMLA Notice](#)
- [GINA Notice](#)

Acknowledged Documents

The following documents were acknowledged by you while filling out one or more of your application. If you acknowledged the same document in multiple applications, it will be listed with the time and date of each acknowledgement.

If the version of the document has been changed since you acknowledged it, the version you acknowledged will be displayed when clicking on the document link. The new document version will be shown in new applications only and can be accessed by clicking on the document link above.



You can view your completed application on the following page.